

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		8-28-01
O.I.P.E. CLASSIFIER		19	9-5-01
FORMALITY REVIEW	1A	361113	9-26-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	3 9 3
1	5 6 4
2	08 03 04
3	✓ ✓ ✓
4	✓ ✓ ✓
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11	✓
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21	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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